N. 1

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POSITION	IN!TIALS	ID KO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		21	1/24/01
FORMALITY REVIEW	AM	917	102-09-01
RESPONSE FORMALITY REVIEW	<del></del>		

## **INDEX OF CLAIMS**

~	Rejected	N	Non-elected
=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim	Date
1   N	
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2   0	
3	
4 V   54   104     5 V   105   106     6 N   106   106     7 V   106   107     2 8 V   55   108     9 V   58   109     10 O   60   110     61 V   111   111     12 V   62   112     63 S   113   114     15 S   65   115     16 S   66   116     17 S   68   118     18 S   68   118     19 S   69   119     20 C   70   120     21 C   71   72	
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6 ()   7   106     7 ()   107     2 8 ()   57   108     9 ()   58   108     10 ()   100   100     10 ()   60   110     11 ()   111   111     12 ()   62   112     13 ()   63   113     14 ()   64   114     15 ()   66   116     17 ()   66   116     17 ()   67   117     18 ()   68 ()   118     19 ()   69 ()   119     20 ()   70 ()   120     21 ()   71 ()   121     - 22 ()   72 ()   122	
7   107     2   8     9   10     10   0     60   109     110   110     111   111     62   112     63   113     14   65     16   65     17   66     17   67     18   68     19   69     20   70     21   71     120     21   71     72   122	
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15 65   16 115   17 66   18 67   19 68   20 70   21 71   22 72   115   116   117   118   118   119   120   121   72   122	<del>                                     </del>
16 66   17 18   18 68   19 69   20 70   21 71   22 72   116 117   118 118   119 119   120 120   21 71   121 72   122	
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26 76 126	<del>                                      </del>
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28 78 128	<del>                                      </del>
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31 81 131	
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If more than 150 claims or 10 actions staple additional sheet here